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ORIGINAL ARTICLE

Knowledge, perspectives and attitudes about allergen-specific immunotherapy for respiratory allergic disease among paediatricians in Turkey

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Abstract
Background: Allergen-specific immunotherapy (ASI) is the only effective treatment for allergic respiratory diseases which has the potential to change the natural course of the disease. In this present study we aimed to evaluate the paediatricians' knowledge, perspectives and attitudes about ASI for allergic respiratory diseases.
Materials and methods: The study was conducted between September 2014 – January 2015. A survey of 25 questions assessing paediatricians' knowledge, perceptions and attitudes about ASI was developed by an expert panel and applied by physicians in hospitals in Izmir, Turkey, where the paediatricians work. Data were recorded in SPSS for Windows v.16. Descriptive statistics, chi square analysis was used. $P < 0.05$ was considered as significant.
Results: Fully completed surveys from 180 paediatricians were analysed. The respondent paediatricians had an age of 37 ± 8.2 years, and 56 of them were male. The majority of the respondents (*n*: 146) were working fewer than five years as a paediatric specialist. 93.9% of the paediatricians believed that ASI was effective for the treatment of allergic respiratory diseases. There was satisfactory knowledge of the characteristics, aims, effects and limits of ASI.
Conclusion: ASI is generally well-known and accepted among paediatricians. A better synergy between paediatricians and paediatric allergy specialists can provide more use of this treatment method for allergic respiratory diseases in childhood.
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Introduction

Allergic respiratory disease represents a significant and expanding health problem worldwide.[1] During the past four decades, a dramatic increase in the prevalence of allergic disease has occurred, and respiratory allergic disease is now the most common chronic disease among children and adolescents.[2,3] The increase is especially problematic in children because of the chronicity and the frequently aggravating nature of the disease.[4] So early and correct diagnosis and an adequate therapeutic management of allergic respiratory diseases in children are strongly desirable.

Allergen specific immunotherapy (ASI) is the only effective treatment for respiratory allergy which has the potential to change the natural course of the disease.[5] Its immunological mechanisms of action have been demonstrated as induction of allergen specific immune tolerance. Many clinical trials and meta-analyses have convincingly shown that ASI can achieve promising results for patients and the society, improving the quality of life, reducing the long term costs and burden of allergies.[6] Despite this, ASI remains underused in patients with allergic rhinitis or asthma worldwide.[7]

Paediatricians are the first-line specialist who face the problems related to respiratory allergic disease in childhood. Based on these premises we performed a questionnaire-based survey among paediatricians in Izmir, Turkey to assess their knowledge, perception and attitude about the ASI.

Materials and methods

The questionnaire was developed based on the current literature, guidelines, and expert opinions[8-10] (Table 1). Responses to the questionnaire were received between September 2014 through January 2015 from paediatricians working in our and the other hospitals in the İzmir area. The questionnaire (Y/N, T/F or multiple-choice answers) consisted of 25 items evaluating the paediatricians' characteristics (age, gender, practice setting and working time) and knowledge, perception and attitudes regarding ASI.

Table 1 Demographic characteristics of the paediatricians who responded to the questionnaire ($n = 180$).

Characteristics	*n* (%)
Age (years)	*37 ± 8.2 (27–61)
Gender	
Male	56 (31.1)
Female	124 (68.9)
Practice setting	
University hospital	97 (53.8)
Government/state hospital	83 (46.2)
Working time	
0–5 years	146 (81.1)
6–10	24 (13.3)
≥10	10 (5.6)

* Mean ± Standard error of the mean (range).

The Clinical and Laboratory Research Ethics Committee (2014/38-13) and the Provincial Directorate of Health approved the study. The data was recorded in SPSS for Windows v.16 (SPSS, Inc., Chicago, IL, USA). The frequency (%) was used for descriptive data, Pearson x^2 and Fisher Exact tests were used for comparisons between groups. $P < 0.05$ was considered significant.

Results

Characteristics of the respondent paediatricians in İzmir

Fully completed surveys from 180 paediatricians were analysed. The characteristics of the study group are summarised in Table 1. The respondent population had a mean age of 37 ± 8.2 years (range 27–61), and 56 (31%) of them were male. 54% of the respondent paediatricians worked in the university hospital and 46% of them worked in the government/state hospital. The majority of respondents (*n*: 146) have worked fewer than five years as a paediatric specialist.

Knowledge and perception of paediatricians about allergen specific immunotherapy in İzmir

Responses to several questions regarding ASI are presented in Table 2. According to the results, it seems that the general knowledge on ASI is overall satisfactory among paediatricians in İzmir and that they are well aware that ASI is recommended for allergic respiratory disease. The main differences between SCIT and SLIT, especially concerning the efficacy and safety aspects, are also known.

Attitudes of paediatricians in İzmir about allergen specific immunotherapy

Responses to several questions about attitudes of paediatricians for ASI are presented in Table 3. The majority of respondent paediatricians (93.9%) believe that ASI is a valid therapeutic option for patients with allergic rhinitis and/or asthma. The majority of respondent paediatricians (93.6%) indicated that they refer the patients with allergic rhinitis and/or asthma to the paediatric allergy specialist for immunotherapy treatment option. 87.8% of respondent paediatricians agreed that the allergen specific immunotherapy should be administered and maintained under the supervision of the paediatric allergy specialist.

There were not significant differences between knowledge, perception and attitudes of paediatricians about ASI and experience of them.

Discussion

Respiratory allergic disease represents a significant health problem in both developed and developing countries.[1] During the past four decades, a dramatic increase in the prevalence of allergic disease has occurred, and respiratory allergic disease is now the most common chronic disease among children and adolescents.[2,3] This increase is especially problematic in children becauseof the prognosis of

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